|   |  |  |                     |                      |                |                     |          | Application or Docket Number |                        |              |                     |                        |     |
|---|--|--|---------------------|----------------------|----------------|---------------------|----------|------------------------------|------------------------|--------------|---------------------|------------------------|-----|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  |  |  |                     |                      |                |                     |          |                              | 01/84/10               |              |                     |                        |     |
| _   |  | MALL F   | YTITY               | 1.1                  |                |                     | 1        |                              |                        |              |                     |                        |     |
|   | ·  | CLAIMS AS  | (Column             |                      | (Column 2)     |                     | _        | YPE C                        |                        |              |                     | THAN                   |     |
| TOTAL CLAIMS  |  |  | 9                   |                      |                |                     | ſ        | RATE                         | FEE                    | 1            | RATE                | FEE                    |     |
| FOR   |  |  | · MANSER FILEO      |                      | HUMBER EXTRA   |                     |          | BASIC FEE                    | 355.00                 | OR           | Dasic Fee           | ₹48.8°                 |     |
| TOTAL CHARGEABLE CLAIMS   |  |  | ( minus 20-         |                      | •              | X                   |          | X\$ 9=                       |                        | OR           | X\$18=              |                        |     |
| INDEPENDENT CLAIMS  |  |  | minus 3 =           |                      | · ><           |                     | ŀ        | X40=                         |                        | OR           | X60=                |                        | 1   |
| 3   | LTIPLE DEPEN                                   | DENT CLAIM PI  | RESENT              |                      |                | ı                   | +135=    |                              | OR                     | +270=        | ,                   | 1                      |     |
| . a   | the difference                                 | in column 1 is   | ero, ente           | r To in c            | olumn 2        | ı                   | TOTAL    |                              | OR                     | TOTAL        | 7480                |                        |     |
|   | C  |  |                     | ·                    |                | OTHER               |          |                              |                        |              |                     |                        |     |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |  |  |                     |                      |                |                     | _        | SHALL                        | ENTITY                 | OR           | SMALL               |                        |     |
| MENDMENT A  |  | CLAMS<br>REMAINING<br>AFTER<br>AMENDMENT                           |                     | NUM<br>PREVIO        | BER            | PRESENT<br>EXTRA    |          | RATE                         | ADDI-<br>TIONAL<br>FEE |              | RATE                | ADDI-<br>TIONAI<br>FEE | - 1 |
|   | Total  | .10  | Minus               | .0                   | 0              | • >                 |          | X\$ 9=                       | ٠                      | OR           | X\$18=              |                        | ,   |
|   | Independent                                    | $\cdot > \cdot$  | Minus               | ے ۔۔۔                | 3_             | -0                  |          | X40-                         |                        | OR           | X80-                | 7                      |     |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |  |                     |                      |                |                     | t        | +135•                        |                        |              | +270=               | 7                      |     |
|   |  |  |                     |                      |                |                     | Į        | TOYAL                        | ļ.——                   | OR           | . YOYAL             |                        | 4   |
| 6.9.05 (Column 1) (Column 2) (Column 3)   |  |  |                     |                      |                |                     |          | CONT. FEE                    |                        | OR           | ADDIT, FEE          |                        | -   |
|   |  | CLAIMS   |                     | FSGF                 | EST            |                     | r        |                              | ADD1-                  | 1            |                     | ADDI-                  | _   |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT                                    |                     | PREVI<br>PAID        | DUSLY          | PRESENT<br>EXTRA    |          | RATE                         | TIONAL<br>FEE          |              | RATE                | TIONA                  |     |
|   | Total  | .10  | Minus               | -20                  | <u>ව</u>       | •                   |          | X\$ 9=                       |                        | OR           | X\$18=              | /                      |     |
|   | Independent                                    | • 2<br>NTATION OF M  | Hinus<br>Hitiple OF | PENDEND              | 2              | <u> </u>            |          | X40=                         |                        | OR           | X80=                | 1                      | 7   |
|   |  |  |                     |                      | -              |                     | <b> </b> | +135=                        |                        | OR           | +270=               | X                      |     |
|   | ~ 40   |  |                     |                      |                |                     |          | TOTAL<br>DOIT, FEE           |                        | OR           | YOYAL<br>ADDIT, FEE |                        |     |
| (Column 1) (Column 2) (Column 3)  |  |  |                     |                      |                |                     |          |                              |                        |              | ,                   | γ                      |     |
| AMENDMENT C   |  | COMMS<br>REMAINING<br>AFTER<br>AMENDMENT                           |                     | MUM<br>PREVI<br>PAID | BEA<br>OUSLY   | PRESENT<br>EXTRA    |          | RATE                         | ADDI-<br>TIONAL<br>FEE |              | RATE                | ADDI-<br>TIONA<br>FEE  | - 3 |
|   | Total  | .10  | Minus               | "=                   | <del>2</del> 0 | • 🗡                 |          | X\$ 9=                       |                        | OR           | X\$18=              |                        |     |
|   | Independent                                    | $\cdot \rightarrow$  | Minus               | (-                   | 3_             | •                   | <b>†</b> | X40=                         |                        | OR           | X80=                |                        | 1   |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                     |                      |                |                     |          | +135=                        |                        |              |                     |                        | 1   |
| " If the entry in column t is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20," |  |  |                     |                      |                |                     |          |                              |                        | OR           | +270=               | 4                      |     |
|   | ii the Miches! Nu                              | ration Previously Pr<br>ration Previously Pr<br>stor Proviously Po | aid For DITM        | IS SPACE             | la lace the    | o 3. enter "3"      | _        | TOTAL<br>DOIT, FEE           |                        | OR           | TOTAL<br>ADOIT, FEE |                        | 4   |
|   |  |  | 1.000               |                      | A A M          | · ·· Andrew Married |          |                              | Annaharan digi         | • W <b>D</b> | exito i.            |                        |     |

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